Department of the Treasury Internal Revenue Service

	This	Form is to b	e Used Only I	oy Uni	ted States Cit	izens and R	esident A	liens		
Name of taxpayer						Social se	ocial security number			
Foreign address (including Country)						Your occ	our occupation			
Name of en	nployer >									
Employer's	U.S. ▶									
address	Foreign >									
Employer is (cany that appl	check }	oreign entity foreign affiliate	e of a U.S. com	pany	☐ A U.S. co ☐ Self		pecify) >			
Give the latest ye	ear for which you f	iled a U.S. incom	e tax return 🕨		S	ervice Center wh	ere filed 🕨			
				e earned	l abroad under sec	tion 911 or 913	>			
Check the stat	tus under which	vou claim de	duction from,	B	ona fide residen hysical presence	ice.	Are you	u a itizen?	☐ Yes [] No
	ure to submit	required info	rmation may re	sult in	tem does not a disallowance of	the claimed	OES NOT A deduction	APPLY." or exclus	Fail- sion.	
Part I	To be Compl	eted for Bon	a Fide Reside	nce O	nly (See Instru	uction 8)				
1 List the co	untries where y	ou have lived	and the dates o	f reside	nce during your					
				ona fide	residence bega	n (date)	,	ended (d	late)	
2 Kind of living	g quarters in foreig	gn country ➤ 🗀	Purchased house	☐ Re	nted house or apar	tment 🔲 Ren	ted room [] Quarters	s furnished by	/ employer
-	-				f the tax year? .				. Tyes	☐ No
4 (a) Have	you made a sta	tement to the	authorities of t	the fore	eign country you	claim bona	fide resider	ice in tha		
					im hono fido ro				· T Yes	
(b) Are yo	ou required to p	oay income tax	t to the country horities of the fo	you cia oreign c	im bona fide re ountry that you	sidence ilir . are not a resi	dent. and t	 he counti	· [] tes	☐ No
holde	vou are not sui	piect to its inco	ome tax. vou do	not aua	ality for this stat	us. (See Inst	ruction 8(c).)	,	
5 Complete					essions during t	ne tax year: Date	l Numbe	rof I /	Amount carned i	in II S on
Date arrived in U.S.	Date departed from U.S.	Number of days in U.S. on business	Amount earned in the business (Attach states showing computation)	itement	Date arrived in U.S.	departed from U.S.	Numbe days in on bus	U.S. I b	Amount earned i business (Attach showing compu	statement
		A III. Danash on E	Town 1040		l	l			-	
	this income in Pa									
6 (a) State	any contractual	terms or other	er conditions rel	ating to	the length of y	our employm	ent abroad	•		
(b) State	the type of visa	you entered	the foreign cour	ntry und	der our stay or emp	Novmont in a	foreign co		Voc	No
			is as to the len	gui oi y	our stay or emp	noyment in a	ioreign co	unitiy: .	. □ ,es	□ '''
If "Ye	s," attach expla	mation.	s while residing	ahroa	i?				□ Voe	□ No
If "Ye	s," show addre	ss of your nom	ie, whether it wa	is rente	d, and the name	s and relation	isnips of ti	ie occupa	ants	
Part II	To be Comple	ted for Phys	ical Presence	Only (See Instructio	n 9)				
					eign countries i		from	t	hrough	
2 Fnter vour	nrincipal coun	try of employ	nent during you	r tax y	ear 🕨					
O Enton all to	rovol abroad du	ring the 18-m	onth period that	the tes	t is based on.	except travel	between fo	reign co	untries tha	t did not
imumbum tra	wal on ar aver	international	waters for 24 i	ากแรร ก	r more, it the it	ast entry is a	n arrıvaı in	a toreigi	n country. E	enter the
number of full days to the end of 18-month period. If you have no travel to report during the period, write in the schedule that you were physically present in a foreign country or countries during the entire 18-month period.										
Name of country (Including U.S.)		Date arrived		Date departed Ful		Full d present count	ays Number	Number of days in U.S. on business (Attach statement showing computation.) ²		
				<u> </u>				_ _		
Do not include i	this income in Par	t III Report on F	orm 1040.							

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P	To be Completed by All Taxpayers							
10	Enter below all, including noncash remuneration, income from sources outside the United St	ates earned during						
	1979. (See Instructions 7, 10(b), 10(c), and 10(d).) Is part of the income (such as bonuses							
	formed in 1979, but received in another tax year?		☐ Yes ☐ No					
	If "Yes," see Instructions 10(a) and 10(e).	···						
	Report all income received during 1979 on your Form 1040 regardless of when the services all or part of your income in foreign currency, translate its exchange value into terms of U at the time you actually or constructively received the income. Do not report income shown i	.S. dollars at the r	rates prevailing					
_	Earned Income for Personal Services Rendered in Foreign Countries During 1979	Exchange rates used	Amount (In U.S. dollars)					
11	Total wages, salaries, bonuses, commissions, etc., earned this year							
	Pensions and annuities (see Instruction 10(d))							
13	Allowable share of income for personal services rendered this year (see Instructions 7 and 10(a)):							
	(a) In a business (including farming) or profession (attach Schedule C or F (Form 1040)) .		l					
	(b) In a partnership (give name, address, and nature of income)	1						
14	Noncash remuneration (market value of property or facilities furnished by employer—attach							
	statement showing how determined):							
	(a) Home (lodging)							
	(c) Car	1						
	(d) Other property or facilities (specify)							
15	Other foreign earned income (specify)							
16	Allowances, reimbursements, or expenses paid on your behalf for services rendered this year:							
10	(a) Cost of living							
	(b) Overseas differential							
	(c) Family							
	(d) Education							
	(e) Home leave							
	** =	100000000000000000000000000000000000000						
	(g) For any other purpose (specify)	1						
		:						
	(h) Total allowances, reimbursements, etc. Add lines 16(a) through line 16(g)							
17	Total earned income from foreign sources (add lines 11 through 15 and line 16(h))							
	(a) Value of meals and lodging included in income above which are excludable under secti		***************************************					
10	struction 10(c))							
	(b) Net earned income from foreign sources (subtract line 18(a) from line 17)							
19	Did you maintain a separate foreign residence for your family due to adverse living conditions a	it your tax home?	☐ Yes ☐ No					
	If "Yes," give city and country of the separate foreign residence. Also show number of days							
	year that you maintained a second household at that address							
20	List your tax home(s) during your tax year		— V — r:					
	Did you change your tax home at any time during your tax year?		∐ res ∐ No					
21	Note: If you answered "Yes" to either 19 or 20 above, see Instructions 11, 15, and 17 before condition Did you live in a camp located in a hardship area for the convenience of your employer?		□ Voe □ N-					
Z I	(See Instruction 18 for a description of what is considered a camp.)		☐ Yes ☐ No					
	If "Yes," you may elect (a) or (b) below. If "No," you may claim (b) below.							
	(a) You may exclude from gross income the amount of \$20,000 (prorated on a daily basis	for days you lived						
	in a camp). See Part V.	,. , ,						
	(b) You may claim the deduction for excess foreign living expenses. See Part IV.							

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			ning the Deduction for Excess Foreign Living Expenses	
			hooling Expense (See Instruction 12)	
22	Complete the following for each depen	ident child for	or whom you claim a schooling expense deduction:	1
	Name of dependent child	Age	Address (including country) of school attended	Schooling ex- penses claimed
23	Total qualified schooling expenses. En	ter here and	d on lines 31(b) and 36	
			e Transportation Expense (See Instruction 13)	
24	Enter total number of trips for which yo dependents as a separate trip ▶	ou are claimi . Total (ng a deduction. Count each trip by you, your spouse, and your expense for all trips; also enter on lines 31(c) and 37	
	Q	ualified Hard	dship Area Amount (See Instruction 14)	
25	Name of hardship area	. Date tax h	ome was established ended	
				\$ 5,000.00
27	Number of days that you qualified during	ng the tax ye	ear	
28	Percentage applicable (divide the numl	ber of days o	on line 27 by 365)	<u></u>
<u>29</u>			cent on line 28). Also enter on lines 31(d) and 38	 \$
			busing Expenses (See Instruction 16)	ī
30	Expenses paid or incurred for housing	at your tax	home during the year. (If you maintained a qualified second	
	household, see Instruction 17 for add			
31	Figure your base housing amount as f	ollows. Entel	ri	
	(b) Qualified schooling expenses (from	see mstructi line 22\	ion 16)	
	(c) Qualified home leave transportation	n evnenses	(from line 24)	
	(d) Qualified hardship area amount (1			
	(e) Qualified cost-of-living differential			
	(f) Housing expenses from line 30.			
			(i))	
			31(h)	
32			nter zero	
			enter earned income as modified by In-	
	struction 17(b)(i). Otherwise, omit line			
34	Amount from line 31(g)			
	(a) Housing expenses for qualified s			
			zero, enter zero	
	* *		nter 20% (1/5) of line 34(c)	
	(e) Subtract line 34(d) from line 34(a			
35			ed a qualified second household and your tax home was in a	
			and 34(e). Otherwise, enter the total of lines 32 and 34(e).	
_	Also enter on line 40		of Excess Foreign Living Expenses	
36	Qualified schooling expenses from lin	e 23		l
	Qualified home leave transportation ex			
	Qualified hardship area amount from			
	Qualified cost-of-living differential from			
	Qualified housing expenses from line			
	Total expenses (add lines 36 through			
	Limitation:		1	
			m Part III, line 18(b))	
			sources (see Instruction 11(b))	
	(c) Net earned income from foreign	sources (sul	btract line 42(b) from line 42(a)). If less	
	than zero, enter zero			
43	Deduction for excess foreign living exp		r the amount from line 41 or 42(c), whichever is smaller. Also	

Part V To be Completed by Taxpayers Claiming the Exclusion of Income Earned in a Hardship Area Camp (See Instruction 18)

	Complete the following for days you lived in a hardship area during the tax year:				
Name of hardship area	Date arrived	Date departed	lived in hardship area	residence that area qualified	
		-	-		
			-		
			-		
··			-		

45 Total number of full qualifying da	ays in all hardship areas. (Ente	er here and on line 47 below.)			
46 Maximum exclusion				\$20,000.00	
47 Number of days that you qualified	I for exclusion during the tax y	ear (from line 45 above)			
48 Percentage applicable (divide the	number of days on line 47 by	365)			
49 Maximum allowable exclusion (m	ultiply the amount on line 46	by the percent on line 48).		\$	
50 Enter the exclusion from line 4	19 or the amount you earned	d during the days you qualit	ied, whichever is		
smaller					
51 Deductions allocable to excluded	income. (See Instruction 18(c) and attach a schedule.) .			
52 Subtract line 51 from line 50. Ent	er here and in parenthesis on	Form 1040, line 21, and label i			
Form 2555". (On Form 1040, sub	stract the amount from your in	come to arrive at Total income	e on line 22.) . 🕨		